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ABSTRACT

These guidelines were prepared to provide direction toward implementing a functional instruction curriculum that leads to independence and occupational skills for Ohio's developmentally handicapped and multihandicapped students. The curriculum uses a three-part definition of adaptive behavior, involving independent functioning, personal responsibility, and social responsibility. To assist teachers with carrying out effective, functional instructional programs, the guidelines address program goals and current issues in special education programming. Specifically, the guidelines cover: definitions and key principles; the multifactorial evaluation; the evaluation team report; the Individualized Education Program (IEP) process and linking assessment to IEP goals; linking courses of study and task analyses to instruction; lesson planning; and descriptions of seven adaptive behavior assessment instruments. (14 references) (JDD)

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ADAPTIVE BEHAVIOR

GUIDELINES

multifactorial
evaluation

individualized
education
program

functional
instruction

independence
and
occupational skills

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GUIDELINES

Prepared by an
Ohio Association of Supervisors and
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And the

Ohio Department of Education, Division of
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January, 1988

Adaptive Behavior Guidelines has been prepared to provide direction toward implementing a functional instruction curriculum that leads to independence and occupational skills for developmentally handicapped and multihandicapped students.

This publication is the result of efforts by a diverse group of professionals. I would like to express my sincere appreciation to members of the Ohio Association of Supervisors and Work-Study Coordinators of DH Programs and to the many individuals who contributed to this effort. A special word of thanks goes to Ed Kapel, Kristen Kask, Rosa Lockwood, Arlene Baker, and Eileen Young, all of whom spent many hours reviewing and refining the document in its final stages.

Adaptive Behavior Guidelines is designed to address program goals and current issues in special education programming. A major focus of the publication is a discussion of the definition and key principles of adaptive behavior. The sections on multifactored evaluation, the IEP process, and lesson planning will assist teachers of DH and MH students with carrying out effective, functional instructional programs.

DH and MH students in Ohio will share the benefits of this cooperative effort as school personnel put into practice the guidelines presented in this publication.


Frank E. New, Director
Division of Special Education

1. Preface

Program Goals

Ohio *Rules for the Education of Handicapped Children* state that the educational programming for developmentally handicapped (DH) and multihandicapped (MH) students shall be designed "to provide skills leading to independence as an adult based on the evaluation of each child" and "to provide objectives leading to one or more occupational skills." (Rules 3301-51-04 A.2. and F.2.) The special education of DH and MH students must focus on the development of adaptive behavior skills, through functional instruction by special education personnel, to achieve the ultimate goals of independence and employability of handicapped students.

Current Issues

Current issues in the education of DH and MH students center around the following questions:

1. What is "adaptive behavior," as required by Ohio *Rules for the Education of Handicapped Children*?
2. Why is the development of adaptive behavior skills so important?
3. How are adaptive behavior skills acquired?
4. How is awareness of adaptive behavior developed in individuals—teachers, parents, administrators, employers, and related services personnel—who work with DH and MH students?
5. How can special education program objectives for adaptive behavior be accomplished?
6. What is the relationship between functional instruction and adaptive behavior?
7. How can special education facilitate the employability of handicapped students entering the world of work?

Purpose of Publication

Adaptive Behavior Guidelines was developed in response to the Ohio Department of Education's Initiatives for Special Education. This publication was designed to address program goals and current issues in special education programming for DH and MH students.

Publication Development

An invitational meeting for professionals who work with developmentally handicapped children was held in February 1984 at the Central Ohio Special Education Regional Resource Center (SERRC). Members of the Ohio Association of Supervisors and Work-Study Coordinators of DH Programs (OASWSC) also met to seek ways to address problems facing parents, educators, and other professionals who were concerned with providing an appropriate education for DH students.

From this meeting, a task force was formed to focus on improving the instruction of both developmentally handicapped and multihandicapped students in the area of adaptive behavior. In 1986 a new committee was formed through the West Central Ohio SERRC and included representation from OASWSC.

In cooperation with the Division of Special Education, the document was reviewed and prepared for final editing. Throughout the process, OASWSC and Division of Special Education personnel worked in cooperation to produce a handbook that would assist those who supervise and implement programs for developmentally handicapped and multihandicapped children.

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2. Definitions and Key Principles

Functional Instruction

Recent attention has been given to functional curriculums and courses of study. The term "functional" refers to learning activities that are centered around achieving independence and acquiring occupational skills. However, if independence and occupational skills are to be achieved with developmentally handicapped and multihandicapped students, then particular emphasis must be given to altering curricular materials to achieve the goals of functional instruction. *Ohio Rules for the Education of Handicapped Children (Ohio Rules)* use the term "adaptive behavior" when referring to the concept of functional instruction.

Ohio Rules define adaptive behavior as "the effectiveness with which the individual copes with the natural and social demands of his or her environment." Rule 3301-51-01 further states that there are two major facets to adaptive behavior:

1. The degree to which the individual is able to function and maintain himself or herself independently, and
2. The degree to which he or she meets satisfactorily the culturally imposed demands of personal and social responsibilities.

Adaptive behavior is also defined as the effectiveness or the degree with which the individual meets the standards of personal independence and social responsibility expected for his or her age or cultural group. Thus, adaptive behavior refers to the skills necessary for an individual to function as a responsible member of the community.

Adaptive behavior is, in many ways, the learning of basic survival skills. Such skills include making everyday social judgments which facilitate integration into one's community and solving everyday problems in an independent manner.

Major Components

Most definitions of adaptive behavior imply several areas of specific functioning. The three most prominent areas are independent functioning, personal responsibility, and social responsibility.

Independent functioning includes those behaviors relevant to the everyday demands of survival and those relevant to specific ages. The survival behaviors include basic needs such as eating, dressing, toileting, and personal hygiene and expanded needs such as travel and mobility, money management, and safety. Some behaviors are not necessary for survival but are desirable to meet cultural expectations, such as manners and customs of dress.

Personal responsibility involves self-direction in the assumption of responsibility for one's own actions. Communication skills and decision-making skills are essential to personal responsibility. The individual must be able to understand and correct errors in judgment, understand cause and effect, weigh various courses of action, and get along with others (both peers and adults) on an interpersonal level in a mature fashion.

Social responsibility is the ability of the individual to accept responsibility as a member of a community group and to carry out appropriate behaviors in terms of these group expectations. Social responsibility includes cooperating and interacting with others and developing appropriate levels of conformity and emotional maturity to meet culturally imposed expectations. These expectations include adjustment in a community, vocational and career competency, and use of leisure time. Skills necessary to achieve social responsibility include managing and caring for one's personal belongings, becoming responsible (both directly and indirectly) for the care of others, and following current events.

Programs

Ohio Rules, effective July 1, 1982, define the classification and placement of handicapped children in public schools. According to the rules, children with adaptive behavior problems are either developmentally handicapped (mentally retarded) or multihandicapped.

Developmentally handicapped is defined in Rule 3301-51-01 N. as "significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior manifested during the developmental period, which adversely affects a child's educational performance." The rules extend the definition of mental retardation to include the range of borderline intellectual functioning up to and including an IQ of 80.

Eligibility to the program for developmentally handicapped children is described in Rule 3301-51-04 F.1. as follows:

1. Eligibility

A child who meets the definition for developmentally handicapped in paragraph N. of rule 3301-51-01 of the Administrative Code and the following requirements shall be eligible for special education programming and related services for developmentally handicapped children.

- a. Each child shall have a multifactored evaluation for initial placement that includes, but is not necessarily limited to, evaluations in the following areas:
 - (i) General intelligence as determined through a measure of cognitive functioning administered by a qualified psychologist using a test designed for individual administration;
 - (ii) Academic performance;
 - (iii) Hearing, vision, and motor abilities;
 - (iv) Communicative status; and
 - (v) Adaptive behavior.
- b. In addition to the requirements for eligibility mentioned above, personnel shall also draw upon information from a variety of sources, including teacher recommendations, physical condition, and social or cultural background.
- c. Each child shall have a measured intelligence quotient of eighty or below.
- d. Each child shall exhibit deficits in academic performance.
- e. Each child shall exhibit deficits in adaptive behavior which adversely affect the child's educational performance and/or independent daily living skills. Evidence of deficits in a minimum of two areas of adaptive behavior must be documented through the use of individually administered standardized instruments which have been validated for the specific purpose of measuring adaptive behavior.
- f. Medical consultation shall be encouraged especially when school authorities feel that there has been a change in a child's behavior or educational functioning or when new symptoms are detected.
- g. The required reevaluation includes, but is not necessarily limited to, areas in paragraphs F.1.a. and F.1.b. of this rule.



Multihandicapped is defined in Rule 3301-51-01 DD. as "such a severe impairment, and/or concomitant impairments, that the child's educational problems make it impossible to accommodate the needs of the child in any program but a program for multihandicapped children. (This definition may include deaf-blind; autistic; and moderately, severely or profoundly developmentally handicapped children.)"

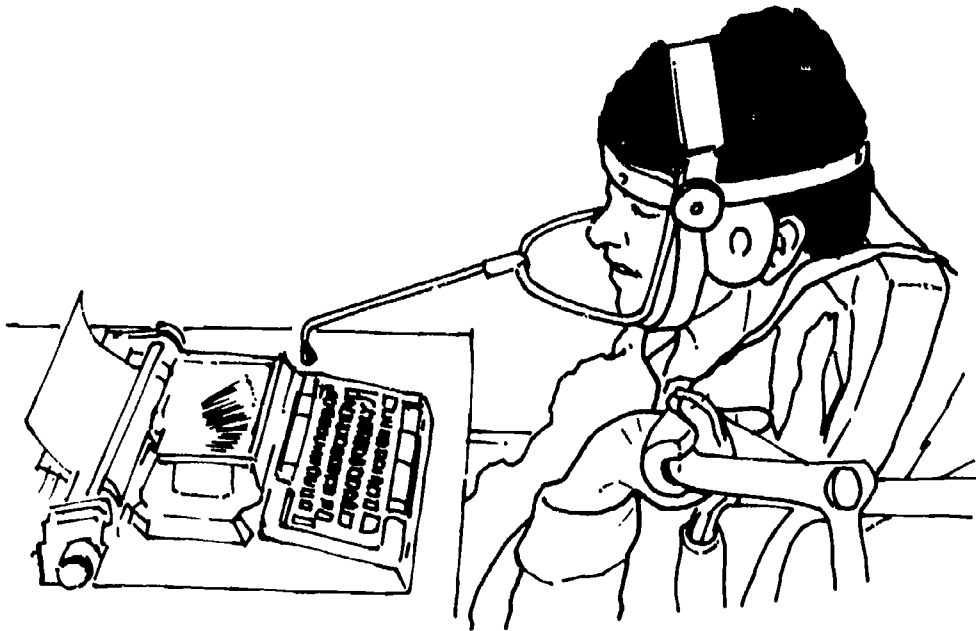
Eligibility to the program for multihandicapped children is described in Rule 3301-51-04 A.1. as follows:

1. Eligibility

A child who meets the definition of multihandicapped according to paragraph DD. of rule 3301-51-01 of the Administrative Code and the following requirements shall be eligible for special education programming and related services for multihandicapped children.

- a. Each child shall have a multifactored evaluation for initial placement that includes, but is not necessarily limited to, evaluations in the following areas:
 - (i) Physical examination completed by a licensed doctor of medicine or doctor of osteopathy;
 - (ii) General intelligence as determined through a measure of cognitive functioning as administered by a qualified psychologist using a test designed for individual administration;
 - (iii) Academic performance;
 - (iv) Vision, hearing, and motor abilities;
 - (v) Communicative status;
 - (vi) Adaptive behavior; and
 - (vii) Social and emotional status.
- b. Each child shall exhibit:
 - (i) A combination of two or more handicaps as defined in paragraphs K., L., N., V., GG., II., AAA., GGG., and KKK. of rule 3301-51-01 of the Administrative Code and moderate, severe or profound deficits in communication or adaptive behavior; or
 - (ii) A moderate, severe or profound developmental handicap with moderate, severe or profound deficits in socialization, communication or adaptive behavior.
- c. Medical consultation shall be encouraged on a continuing basis, especially when the school authorities feel that there has been a change in the child's behavior or educational functioning or when new symptoms are detected.
- d. The required reevaluation includes, but is not necessarily limited to, areas in paragraphs A.1.a.(i) to A.1.a.(vii) of this rule.





Important Principles

Relationship to age. Age levels and skill expectancies are generally placed into three categories: infancy and early childhood, childhood and early adolescence, and late adolescence and adult life. Some skills span age levels, but expectations and quality of performance are adjusted as the individual grows older.

For example, in the area of survival behaviors, preschoolers in the infancy and early childhood level are expected to dress themselves while receiving assistance with the more difficult articles of clothing. Middle school children in the childhood and early adolescence level are expected to dress themselves completely without assistance, wash their hair and bathe independently, and buy some clothing accessories. Persons in the late adolescence and adult life level are expected to take complete care of dress, buy clothing and accessories within budgetary guidelines, and exercise judgment in these activities.

Expectations of others. The authors of the Vineland Behavior Scale emphasize that adaptive behavior is defined according to the expectations or standards of other people. The adequacy of an individual's adaptive behavior is judged by those who live, work, and interact with the individual.

Routine performance of skills. Adaptive behavior is determined by an individual's typical performance rather than a simple ability. Optimal adaptive behavior means that the individual routinely performs those skills associated with independent functioning, personal responsibility, and social responsibility. Those skills performed by an individual with concurrent reminders, assistance, or supervision are not considered to be developed to an acceptable level of adaptive behavior.

The ability of an individual to perform adaptive behavior skills routinely needs to be carefully assessed, lest an unrealistically high estimate of an individual's performance is made. This caution is especially important during the parent interview and the reevaluation process. Only routine skills which are a part of the individual's everyday behavior are acknowledged as being adaptive.

Learning of adaptive behavior skills. Understanding how adaptive behavior is learned is important to understanding the concept. Adaptive behavior is the everyday learning of skills essential to independent functioning, personal responsibility, and social responsibility. Adaptive behavior is not learned the way one learns to count or spell but is learned from reciprocity with other persons in the everyday acquisition of information from the environment.

Many handicapped individuals are not able to acquire information in this fashion. Thus, they must be taught adaptive behavior skills to be able to achieve independent functioning, personal responsibility, and social responsibility.

The Learning Process

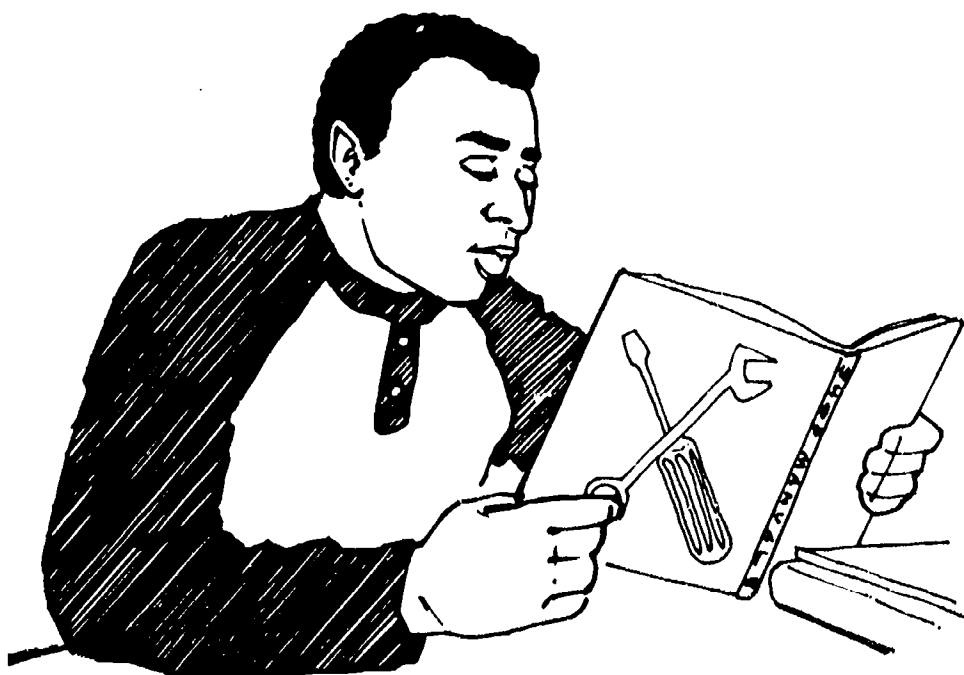
Most children learn adaptive behaviors incidentally or with very little instruction. Incidental learning results in behaviors acquired with little or no formal instruction. Behavior is learned through imitation and independent exploration. Examples of incidental learning include the following:

1. Information identification (name, birthdate, age, address, and telephone number)
2. Social speech (conversation, manners, introductions, and telephone skills)
3. Self-care skills (personal hygiene, personal welfare, and safety)
4. Independent travel (travel within the home, neighborhood, and community; also use of public transportation)
5. Interpersonal relationships (exhibiting approved behaviors and self-control)

The majority of developmentally handicapped and multihandicapped children do not acquire adaptive behaviors incidentally. They must acquire adaptive behaviors through a two-stage process: *learning* and *transition*. These children learn adaptive behavior skills through direct instruction and simulation in the school environment. Then they must be specifically taught to transfer skills learned in the classroom to real-life situations. By contrast, nonhandicapped children transfer easily; they adapt counting to making change and playing store to making a purchase in a real store.

Teachers of developmentally handicapped and multihandicapped children cannot assume transfer or transition of learned behaviors and skills. They must plan instruction in the educational setting and in the community to bridge the gap for these students. Examples of adaptive behaviors which are taught for transition are as follows:

1. Decision making
2. Leisure time activities
3. Occupational-related skills (punctuality, following directions, and positive work habits)
4. Use of machines (telephones; banking, vending, and copying machines)
5. Functional reading (traffic signs, directions, application forms, shop manuals, and restaurant menus)



3. The Multifactored Evaluation

Multifactored Evaluation Areas

As specified in Rule 3301-51-02 D.1., "Each school district shall develop and implement written procedures which require that a multifactored evaluation of any child suspected of being handicapped be conducted by a multidisciplinary group of professionals." Data from the multifactored evaluation (MFE) are used to determine eligibility for special education programs.

Developmentally handicapped. Each child who meets the definition of developmentally handicapped in Rule 3301-51-01 N. must have a multifactored evaluation that includes evaluations in the following areas:

1. General intelligence
2. Academic performance
3. Hearing, vision, and motor abilities
4. Communicative status
5. Adaptive behavior
6. Teacher recommendation
7. Physical condition
8. Social or cultural background

Multihandicapped. Each child who meets the definition of multihandicapped in Rule 3301-51-01 DD. must have a multifactored evaluation that includes evaluations in the following areas:

1. Physical examination
2. General intelligence
3. Academic performance
4. Vision, hearing, and motor abilities
5. Communicative status
6. Adaptive behavior
7. Social and emotional status

The evaluation team must ensure that adequate consideration is afforded each assessment area before eligibility is determined. Adaptive behavior, as a component of the MFE, must be assessed to determine eligibility to DH or MH programs. Issues relating to the examiner who assesses adaptive behavior, the informants who provide information about a child's adaptive behavior skills, and the instruments used to assess adaptive behavior should be carefully considered prior to administering the assessment.

Examiner Issues

Examiner qualifications. Assessment of adaptive behavior is performed by examiners who are trained in conformance with the instructions provided by the producers of evaluation instruments. Instructions contained in evaluation instrument manuals usually specify examiner qualifications essential for administering particular instruments. Specific qualifications for several adaptive behavior instruments can be found in Section 8 of this publication.

Knowledge of child development. Because adaptive behavior skills are developmental in nature, the examiner should possess a thorough knowledge of child development. For most evaluation instruments, such knowledge is assumed and required. Knowledge of child development enables the examiner to understand whether the value ascribed to a child's behavior fairly represents the child and whether the ultimate scores assigned fairly represent age or developmental levels. Knowledge of child development also allows the examiner to determine whether the answers obtained from respondents are relevant.

The examiner's understanding of chronological age and of those skills typical of various age levels is crucial to determining significant deficits in adaptive behavior. Adaptive behavior is related to patterns of general growth and development and, as such, is age-related in nature. Environmental demands are different at different ages and, thus, different skills are emphasized depending on the individual's age.

The American Association for Mental Deficiency (AAMD) clarifies the skills associated with various age levels, as shown in Figure 1.

Figure 1. Skills Associated With Various Age Levels

Infancy and early childhood	Sensory-motor skills development Communication skills (including speech and language) Self-help skills Socialization (development of ability to interact with others)
Childhood and early adolescence	Application of basic academic skills in daily life activities Application of appropriate reasoning and judgment in mastery of the environment Social skills (participating in group activities and interpersonal relationships)
Late adolescence and adult life	Vocational and social responsibilities and performance

Grossman, H. *Manual on Terminology and Classification in Mental Retardation*, p. 13, AAMD, 1977.

Many categories will span the ages with changes in level and quality of performance. For example, in the area generally termed self-help skills, *preschoolers* might be required to dress themselves while receiving some help with difficult items. At the next level, *middle school children* might be expected to dress themselves completely without any assistance, wash their hair and bathe independently, and buy a few clothing accessories. *Adolescents or adults* would be expected to take complete care of their dress, operate under some budgetary restraints, and exercise judgment in doing so.

Figure 2 illustrates in greater detail the landmarks of normal behavior development in young children.



Figure 2. Landmarks of Normal Behavior Development

Age	Motor Behavior	Adaptive Behavior	Language	Personal and Social Behavior
Under 4 weeks	Makes alternating crawling movements Moves head laterally when placed in prone position	Responds to sound of rattle and bell Regards moving objects momentarily	Small, throaty, undifferentiated noises	Quiets when picked up Impassive face
4 weeks	Tonic neck reflex positions predominant Hands fisted Head sags but can hold head erect for a few seconds	Follows moving objects to the midline Shows no interest and drops objects immediately	Beginning vocalization, such as cooing, gurgling, and grunting	Regards face and diminishes activity Responds to speech
16 weeks	Symmetrical postures predominant Holds head balanced Head lifted 90 degrees when prone on forearm	Follows a slowly moving object well Arms activate on sight of dangling object	Laughs aloud Sustained cooing and gurgling	Spontaneous social smile Aware of strange situations
28 weeks	Sits steadily, leaning forward on hands Bounces actively when placed in standing position	One-hand approach and grasps of toy Bangs and shakes rattle Transfers toys	Vocalizes "m-m-m" when crying Makes vowel sounds, such as "ah, ah"	Takes feet to mouth Pats mirror image
40 weeks	Sits alone with good coordination Creeps Pulls self to standing position	Matches two objects at midline Attempts to imitate scribble	Says "da-da" or equivalent Responds to name or nickname	Responds to social play, such as "pat-a-cake" and "peek-a-boo" Feeds self cracker and holds own bottle
52 weeks	Walks with one hand held Stands alone briefly	Releases cube in cup Tries tower of 2 cubes	Uses expressive jargon Gives a toy on request	Cooperates in dressing "Plays" ball
15 months	Toddles Creeps upstairs	—	Says 3 to 5 words meaningfully Pats pictures in books Shows shoes on request	Points or vocalizes wants Throws objects in play or refusal
18 months	Walks, seldom falls Hurts ball Walks upstairs with one hand held	Builds a tower of 3 or 4 cubes Scribbles spontaneously and imitates a writing stroke	Says 10 words, including name Identifies one common object on picture card Names ball and carries out two directions, for example "put on table" and "give to mother"	Feeds self in part, spills Pulls toy on string Carries or hugs a special toy, such as a doll
2 years	Runs well, no falling Kicks large ball Goes upstairs and downstairs alone	Builds a tower of 6 or 7 cubes Aligns cubes, imitating train Imitates vertical and circular strokes	Uses 3-word sentences Carries out four simple directions	Pulls on simple garment Domestic mimicry Refers to self by name
3 years	Rides tricycle Jumps from bottom steps Alternates feet going upstairs	Builds tower of 9 or 10 cubes Imitates a 3-cube bridge Copies a circle	Gives sex and full name Uses plurals Describes what is happening in a picture book	Puts on shoes Unbuttons buttons Feeds self well Understands taking turns
4 years	Walks downstairs one step per tread Stands on one foot for 4 to 8 seconds	Copies a cross Repeats 4 digits Counts 3 objects with correct pointing	Names colors, at least one correctly Understands five prepositional directives — "on," "under," "in," "in back of" or "in front of," and "beside"	Washes and dries own face Brushes teeth Plays cooperatively with other children
5 years	Skips, using feet alternatively Usually has complete sphincter control	Copies a square Draws a recognizable man with a head, body limbs Counts 10 objects accurately	Names the primary colors Names coins: pennies, nickels, dimes Asks meanings of words	Dresses and undresses self Prints a few letters Plays competitive exercise games

A.M. Freedman and H.I. Kaplan (Eds.), *Comprehensive Textbook of Psychiatry*, p. 1362, Williams & Wilkins, 1967. Reprinted with permission of the publisher and author.

Interview skills. Examiners obtain information about a student's adaptive behavior by interviewing individuals most familiar with the student. Thus, examiners must be trained in interviewing skills. Thorough examiners will go beyond obtaining simple yes/no responses from the informant.

Skilled questioning will yield useful information about how the child copes with the environment. Details about the frequency—occasionally, only with prompting, or as a regular aspect of independent functioning—with which the child performs certain behaviors can also be obtained through skilled questioning.

Antecedent behaviors (those which lead up to a specific skill) and subsequent behaviors (those which are in immediate need of developing) can be detected during the interview process. The following example illustrates this point:

The test item asks whether the child can get a drink without assistance. The parent responds, "No, my child cannot get a drink without help from me." The examiner scores this item "0," and the child gets no credit for this item. Such a score could be misleading because further questioning may reveal that the child can go to the sink, get a cup, and stand by the sink when thirsty. The child can also drink appropriately from the cup when it is offered. However, the child cannot manipulate the faucet to turn on the tap.

Examiners may secure other valuable information during the interview process. They have the opportunity to discover more information about parental attitude, family structure, expectations, and everyday family routines that influence learning.

Informant Issues

School vs. home informant. Adaptive behavior refers to the effectiveness with which an individual copes with the natural and social demands of the environment. Therefore, assessment should not be restricted to academic settings. Information should be collected about the student's home, neighborhood, and community so that the assessment reflects the child's total environment. The teacher may serve as the primary informant for the educational setting, and the child's parent or guardian should serve as the primary informant for the home and neighborhood settings.

Assessment of adaptive behavior will require time and commitment from the evaluation team. Efforts to collect information from the child's parent or guardian may be very time consuming and may require considerable flexibility on the part of the school district.

The child's in-school behaviors must be included in a comprehensive assessment of adaptive behavior. It is also important to determine if the skills exhibited in school are demonstrated in out-of-school situations. The parent, guardian, or other primary caretaker can usually provide this information.

Selection of home informant. It is important to determine who has the most comprehensive understanding of the child outside the school environment. Usually, the parent or primary caretaker has knowledge of daily living, socialization, and communication skills and how those skills are used in the home, neighborhood, and community.

The following areas should be considered in selecting the home informant:

1. *Access to information.* The home informant should have the opportunity and skills to thoroughly and accurately report on the child's behaviors in a wide variety of situations. Most respondents, even primary caretakers for children, do not have opportunities to observe children in all of the settings and roles included on adaptive behavior scales. Thus, the examiner should select an informant who has access to all the necessary information.
2. *Informant availability.* A personal meeting between the examiner and the home informant usually generates better information about the child. Establishing rapport with the informant on the telephone may be difficult. The examiner may find that the depth of the discussion is limited, thus minimizing the critical details which can form the basis for the child's programming. Use of the telephone may also create a barrier which prevents evaluation of the veracity of the responses.

3. *Multiple vs. single informants.* Because adaptive behavior scales typically include a broad range of behaviors, observations by multiple informants often provide a more comprehensive view of the child's behavior than do observations by a single informant. Some adaptive behavior measures allow for multiple informants for comparative purposes. However, some measures are not normed for multiple informants and, in fact, require a single informant. The examiner should consult the evaluation instrument manual for information regarding the use of multiple informants.
4. *Discrepancies.* The examiner should consider whether the informant seems to be providing objective information or is exhibiting a positive or negative response set. The examiner should note if the informant's responses seem to be unreliable or inconsistent. Information which is consistent across academic, home, and neighborhood settings lends credence to the responses received about the child's adaptive behavior. On the other hand, discrepancies in information do not necessarily invalidate adaptive behavior ratings because the child's behavior may actually vary in different settings. Thus, the examiner or evaluation team should note and evaluate discrepancies or inconsistencies.

Instrument Issues

Adaptive behavior evaluation instruments, knowledgeably selected and appropriately used, are necessary for comprehensive assessment. Evidence of deficits in a minimum of two areas of adaptive behavior must be documented through the use of individually administered standardized measurements of adaptive behavior. Minimally, then, the evaluation instrument selected must be designed for individual administration and must be validated for measurement of adaptive behavior. The following areas should be considered:

Reliability. There is a need for high reliability, especially when educational decisions such as placement in special education are to be made. Therefore, the evaluation team chairperson or school psychologist should ensure that a high reliability coefficient exists for the instrument(s) to be used to measure adaptive behavior.

Validity. The validity of a test refers to the degree to which it measures that which it sets out to measure. Therefore, validity concerns the appropriateness of the inferences that can be made on the basis of test results. In general, tests cannot be said to be valid or invalid. Rather, a determination can be made regarding how valid a test is for a specific purpose. The availability of a variety of high-quality validity studies lends credence to a test.

The evaluation instrument should also include a representative range of adaptive behavior areas. An instrument which is to be used as the sole measure of adaptive behavior should not, for instance, include only social skills or only school-related behaviors. Assessment should address a full range of adaptive behavior areas and encompass each major component of adaptive behavior—*independent functioning, social responsibility, and personal responsibility.*

Norms. Norm-referenced measurement provides a means of comparing an individual's performance against a standard, defined by the normative population on which the test is standardized. It is important to determine that the norm group is representative of a variety of demographic variables, including age, race, and socioeconomic level. It is difficult to defend the use of tests with normative groups which are restricted in terms of geographic location, sample characteristics, or small normative sample.

Selection of comparison group. Some adaptive behavior evaluation instruments permit the examiner to compare the child's performance with the performance of a variety of groups. Because the identification of mental retardation involves a decision based on a general population, the examiner should consider the group to which the child is being compared when interpreting test results.

Important Questions

Evaluation team members should review adaptive behavior test results with the following questions in mind:

1. Has the evaluation team met to share findings regarding the child's strengths and weaknesses in adaptive behavior?
2. Are team members' adaptive behavior evaluation results in conflict or agreement with each other?
3. Has the evaluation team looked beyond the total score? For example, is there a significant pattern which emerges from the items the student missed?
4. Do the missed items appear to relate strongly to the child's social or cultural background?
5. Has the evaluation team examined all factors, including the examiner's rapport with the informant and a positive or negative response set of the informant, which might have an impact on the child's adaptive behavior score?
6. Has the evaluation team considered reasons why discrepancies may exist among the reports of various informants or between the observed behavior in the adaptive behavior interview and in-school and out-of-school behaviors?
7. Has the evaluation team arrived at its conclusion as a result of team consensus, or was the decision influenced by the personality or power of an individual team member?
8. Has the evaluation team considered the parent in the process of sharing information about the child? Does the team use such information before, during, or after the evaluation?

Deficits in Adaptive Behavior

The determination of whether there is a deficit in adaptive behavior is critical in interpreting the results of the multifactored evaluation. A deficit, while not specifically defined in *Ohio Rules*, must consist of a below-age-level score in a given area of adaptive behavior.

The multifactored evaluation team has the responsibility for documenting consistently low performance in an adaptive behavior area before determining that a deficit exists in that area. Evidence justifying such a determination should be included in the evaluation team report. Although the integration of information from a variety of non-test sources (assessment, observation, etc.) is encouraged, the documentation should clearly indicate that the determination was based on the existence of deficits in a minimum of two areas of adaptive behavior on an individually administered standardized evaluation instrument.



4. The Evaluation Team Report

Requirements

Rule 3301-51-02 D.1. states that "the team chairperson will be responsible for preparing a written report which summarizes and interprets the results of the multifactored evaluation for the IEP conference." The evaluation team report should document specific information in each of the assessment areas, including the name of the evaluation instrument used and the evaluation date. The report should provide a comprehensive summary and interpretation of the multifactored evaluation data that should logically lead to the determination of whether the child is eligible for special education.

Basis for Determination

The multifactored evaluation report should include a statement that serves as the basis for determination of the child's handicapping condition. The basis for determination should be a narrative statement that summarizes the team's deliberation and discussion of the child's eligibility to special education.

The basis for determination cannot be satisfied by a general reference to attached reports, as they contain a large variety of information. Rather, the statement should document the critical factors that led the team to its conclusion regarding the child's eligibility.

Preparation of Team Reports

In some school districts, individual team members report assessment data orally at evaluation team meetings. The team chairperson then lists, summarizes, and interprets all data on one form. In other districts, individual team members prepare written reports for areas assessed, and the team chairperson prepares a cover sheet which summarizes the data, refers to the attached written reports, and indicates eligibility. Figure 3 indicates who may be responsible for reporting or providing information for the evaluation team report.

Figure 3. Required Areas of Assessment for the Evaluation Team Report by Program and Likely Providers of Information

<i>Areas of Assessment</i>	<i>Program</i>	<i>Likely Providers</i>
General intelligence Adaptive behavior Social or cultural background Social and emotional status	DH, MH DH, MH DH MH	School psychologist
Academic performance Teacher recommendations	DH, MH DH	Classroom or special education teacher
Motor abilities —Gross —Fine	DH, MH	Physical education teacher or therapist
Hearing Communicative status	DH, MH DH, MH	Speech pathologist Classroom or special education teacher
Vision Physical condition	DH, MH DH	School nurse Physical education teacher
Physical examination	MH	Doctor of medicine or osteopathy

Excerpts From Team Reports

Excerpts from evaluation team reports are presented in Figures 4 and 5. Figure 4 includes a listing of scores in the left column and the summary and interpretation in the right column. Figure 5 does not list scores at all, but gives the summary and interpretation of the child's performance.

The summary and interpretation portions of these evaluation team reports provide more comprehensive and useful information than just a listing of scores from the evaluation instrument. A team report that gives only the scores is not sufficient, as teachers cannot understand the significance of scores alone.

Analysis of individual items serves as the basis for specifying the child's strengths and weaknesses. This analysis leads to the information on the IEP about present levels of performance, goals, and objectives. Also, the comprehensive nature of such an evaluation team report enables the team to make an informed determination about the child's eligibility to special education.

Figure 4. Excerpt From David's Evaluation Team Report

David, Age 8, IQ = 72

<i>Adaptive Behavior</i>	<i>Summary and Interpretation</i>
Instrument: Vineland ABS interview edition, survey form	Exhibits deficits in all domains.
Informant: David's father	Makes occasional errors in reciting alphabet and phone number.
Examiner: Rose Clark, school psychologist	Reads and prints less than 10 words.
Standard scores:	Dresses self, having some difficulty with shoelaces.
Communication - 57	Needs assistance in crossing streets.
Daily living - 64	Has little awareness of money value.
Socialization - 67	Enjoys group activities, but doesn't consistently follow directions in games.
Composite - 58	Fails to return borrowed items.
	Talks with food in his mouth.

Figure 5. Excerpt From Lori's Evaluation Team Report

Lori, Age 11, IQ = 40

<i>Adaptive Behavior Summary and Interpretation</i>
AAMD adaptive behavior summary completed by Lori's teacher, Jean Smith, on 5/3/87. Deficits in all areas with greatest weaknesses in independent functioning (difficulty with independent personal hygiene, use of table knife, dressing for weather or occasion, traveling in neighborhood, making phone calls).
Prevocational activity: Difficulty working with tools and staying on task without encouragement.
Responsibility: Fails to care for personal belongings or carry out tasks without prompting.
Socialization: Group participation is passive, interrupts others.

5. The IEP Process: Linking Assessment to IEP Goals

Responsibilities

Rule 3301-51-02 E.1.d. states that the IEP conference participants have the following responsibilities:

- (i) Review the multifactored evaluation team report;
- (ii) Determine the nature and degree of special education intervention needed, if any;
- (iii) Develop an individualized education program for a child determined to be in need of special education in accordance with all requirements of paragraph E. of this rule; and
- (iv) Determine educational placement in the least restrictive environment in accordance with the IEP.

The multifactored evaluation team report should be designed to provide information that is both useful and understandable to the parent, the classroom teacher, and others who will participate in the IEP conference. This information will enable the IEP team to determine if special education is necessary and, if so, to develop an IEP and determine placement in the least restrictive environment.

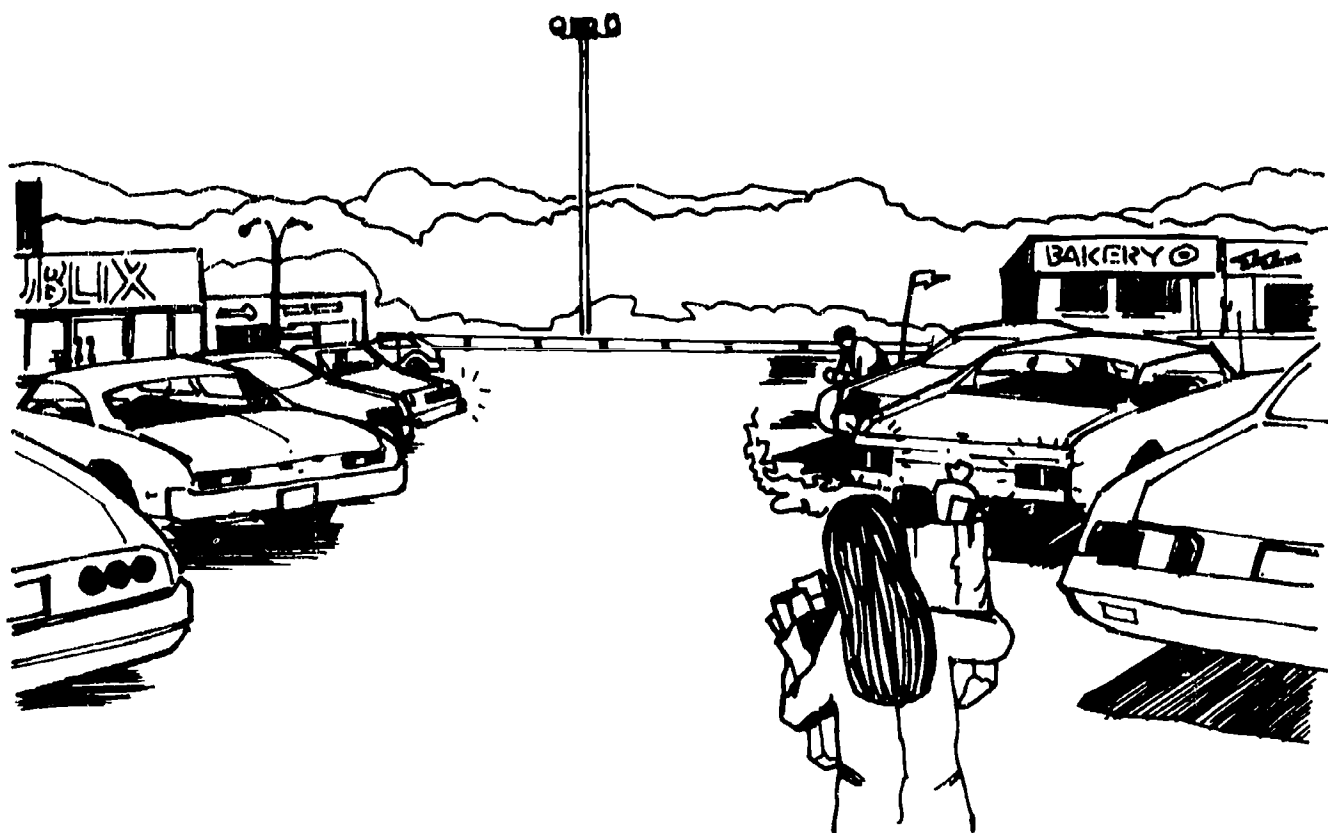
Multifactored evaluation information is crucial to the development of the goals and objectives of the child's IEP. Furthermore, Ohio *Rules* state that the multifactored evaluation data shall be available to and used by the teacher in the development of the child's instructional program.

IEP Goals and Objectives

Ohio *Rules* define the IEP as a written statement of a program for a handicapped child. Rule 3301-51-02 E.7.a. states that the IEP should include the following:

- (i) A statement of the present levels of educational performance of the child;
- (ii) A statement of annual goals, including short-term instructional objectives;
- (iii) A statement of the specific special education and all related services to be provided to the child, and the extent to which the child will be able to participate in regular education programs;
- (iv) The projected date for initiation and anticipated duration of such services; and
- (v) Appropriate objective criteria and evaluation procedures and schedules for determining, on at least an annual basis, whether short term instructional objectives are being achieved and whether current placement is appropriate.

The IEP team must take each deficit area in adaptive behavior and translate it into meaningful goals and objectives. Thus, present levels of performance in adaptive behavior, as well as academic performance, should be indicated on the child's IEP. From these present levels, using the evaluation team's summary and interpretation, the IEP team should be easily able to determine goals for the year and to establish objectives to implement those goals.



Normalization

Since adaptive behavior is directly related to the normalization process, it is imperative that normalization be addressed on the IEP. Normalization means making available, to the mentally retarded, patterns and conditions of everyday life that are as close as possible to the norms and patterns of the mainstream of society.

Thus, appropriate treatment of adaptive behavior deficits is an important part of the effective mainstreaming and placement in the least restrictive environment for these children. Assessment should lead to longitudinal intervention that will provide for skills both as a child and as an adult.

IEP Components

Present levels of performance. Present levels of performance should be based on data from the evaluation team report and should serve as the basis for adaptive behavior goals and objectives. The goals and objectives should relate directly to specific behavior deficits detailed in the evaluation report. For example, if the MFE data indicate a deficit in independent functioning skills, the present level of performance would describe specific areas of deficit, such as the care of clothing or personal grooming. An example of a statement about present levels of performance is the following:

Lori is able to hang up her clothes without prompting.

Annual goals. Annual goals are expected behaviors to be achieved through the implementation of the child's IEP. Goals are broad targets to be achieved within one year and should be based on present levels of performance. A sample goal statement is as follows:

Lori will demonstrate proper care of clothing without prompting or assistance.

Short-term instructional objectives. Objectives are short-term, intermediate steps leading toward the accomplishment of each goal. A sample objective is as follows:

After arrival in the classroom in the morning and after outdoor recess, Lori will hang up her coat, hat, sweater and any other items of outdoor clothing without being reminded.

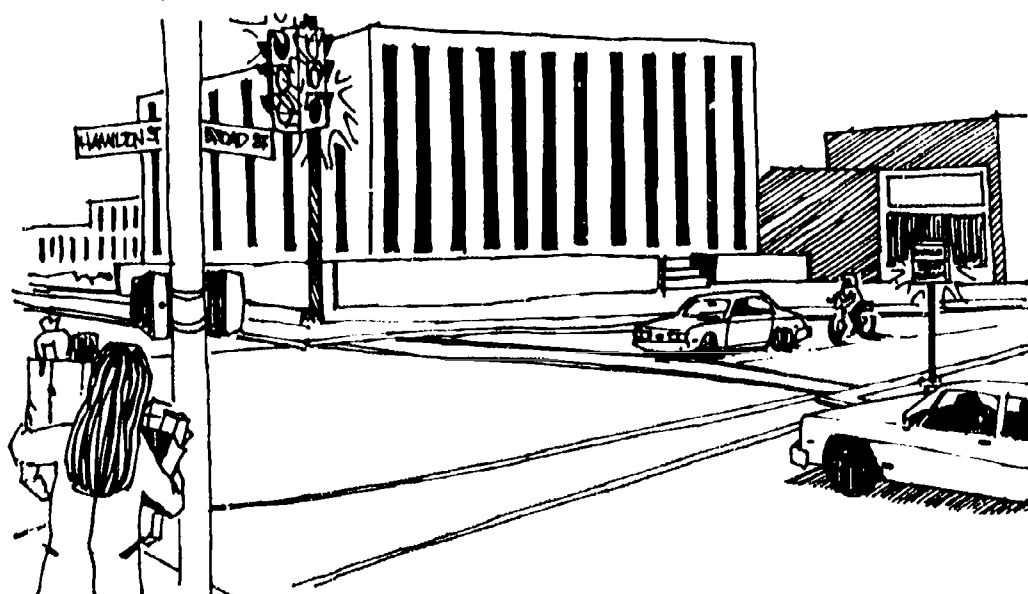
Sample IEP The sample IEP in Figure 6 uses the information in David's evaluation team report. The objectives for David in the area of social studies are coded to the Vineland Adaptive Behavior Scale, the evaluation instrument used for David. Although there is no specific goal called "adaptive behavior," the objectives clearly indicate that adaptive behavior is being taught.

The IEP is intended to provide David with a meaningful program at his level. If at any time the parent or teacher feels that the goals and objectives have been met or are too difficult to meet, the IEP team may reconvene to review and revise the IEP.

Figure 6. Excerpt From David's IEP

<i>Present Levels of Performance</i>	<i>Goals</i>	<i>Objectives*</i>	<i>Evaluation Procedures and Criteria</i>
David is aware of safety signs, e.g., walk lights, traffic lights, and stop signs. He is able to travel within the school environment independently but is unable to walk to and from school by himself.	David will improve safety skills at home and school and in the community.	David will look both ways before crossing streets. (DL45) David will recognize and correctly respond to walk and don't walk lights; red, yellow, and green lights; and stop signs. (DL49)	100% accuracy—teacher, aide, and parent observation 100% accuracy—worksheets and classroom simulation activities
David is able to interact on a one-to-one basis with an adult or peer but is very aggressive and confused in a group setting.	David will improve his group interaction skills.	David will follow rules in simple games without reminders. (S32) David will apologize for unintentional mistakes. (S32)	9 of 10 games—teacher and aide observation 9 of 10 games—teacher, aide, and parent observation
David dresses independently except for shoe tying.	David will dress independently.	David will learn to tie his shoes. (DL43) David will keep shoes tied without reminders.	Teacher observation of successfully tying shoes 4 of 5 days—teacher observation
David does not consistently cover his mouth when sneezing and coughing.	David will improve his personal hygiene habits.	David will cover his mouth when sneezing and coughing.	4 of 5 times—teacher observation

*Code numbers following objectives correspond to the Vineland Adaptive Behavior Scale.



6. Linking Course of Study and Task Analysis to Instruction

Requirements

Section 3313.60 of the Ohio Revised Code requires that "boards of education of county, exempted village, and city school districts shall prescribe a graded course of study for all schools under their control subject to the approval of the state board of education." The State Board of Education has delegated the responsibility for course of study approval to the Division of Elementary and Secondary Education. Rule 3301-35-02 B. of *Minimum Standards for Elementary and Secondary Education* requires that courses of study shall establish the basis for curriculum and instruction and that a course of study shall be adopted for each subject taught.

Course of Study Options

Several approaches to course of study adaptation which may be used by a school district are outlined on pages 52 and 53 of *Fine Arts and Physical Education* of the Minimum Standards Implementation Series, published by the Ohio Department of Education in 1983. Depending on the preference of the staff and administration and the needs of students, one of the following options should be followed for developing a course of study for handicapped students:

1. **Single course of study.** One course of study is developed for both handicapped and nonhandicapped students. No supplement or separate section for handicapped children is included.
2. **Single course of study with supplement.** One basic course of study is developed for both handicapped and nonhandicapped students. A supplemental instructional guide is prepared which addresses the specific needs of handicapped students. This supplement or instructional guide could include the use of alternative resource materials, suggestions for equipment adaptation, selected subject objectives, or differing policies for evaluation.
3. **Separate courses of study.** Two separate course of study documents are developed—one to serve nonhandicapped and most handicapped students and one with different philosophical statements, goals, and objectives to serve handicapped students whose needs are deemed distinct from those of other students.

When considering these three options, school district personnel should address adaptive behavior skills. Adaptive behavior skills may be addressed in that portion of the course of study that deals with functional academic areas, such as numbers and time. However, independent functioning and personal and social responsibilities will need to be more fully developed in the course of study for developmentally handicapped and multihandicapped children. The course of study for these handicapped children should focus on the students' deficits in adaptive behavior skills and should include information from various adaptive behavior measures.

Adaptive behavior should be a planned part of the instructional program for these handicapped children. The course of study should specify the expected student competencies in the form of structured outcomes. The desired outcomes will serve as directives for carrying out the instructional program.

Task Analysis

After the IEP goals and objectives have been set, including specific goals and objectives in the area of adaptive behavior, it will be necessary to review the course of study. The course of study should address adaptive behavior data for DH and MH students. If it does not, the special education teacher must conduct task analysis.

Task analysis helps to determine how to achieve IEP goals and objectives and is the beginning of functional instruction. While the IEP goals and objectives provide a framework by which lesson plans can be developed and instructional strategies and

materials can be selected, consideration should be given to the nature of the actual behavior to be learned by the student.

Some behaviors are academic in nature, while others are concerned with life skills. For either type, it is necessary to determine the components and the characteristics of the behavior that the student has to learn. Only when these precise characteristics are known can the training need be established and the learning objectives written. At this point, task analysis becomes the basis for determining the skills that should be taught.

Task analysis is the process of isolating, describing, and sequencing all of the subtasks or subskills that comprise a particular task. When the child masters the subtasks, he or she is able to perform the task in question and satisfies the learning objective. Task analysis leads to appropriate instruction and individualization of instruction.

Four aims of task analysis are as follows:

1. Describe the task in question.
2. Identify the required behaviors.
3. Identify the conditions under which the behaviors occur.
4. Determine a criterion of acceptable performance.

The more knowledgeable the teacher is of the sequential development of skills, the easier it is to conduct a task analysis and determine where an individual student falls in the hierarchy of component subskills and determine which subskills the student needs to learn. Knowledge of sequential development of skills can be acquired from several sources including the following:

1. Course of study
2. Existing curriculums
3. Graded textbooks, where appropriate
4. Experts in one's field
5. Reasoning
6. Past experiences
7. Knowledge of child development

Figure 7 is an example of an extensive task sequence, also referred to as a task ladder. Figures 8 and 9 illustrate, respectively, an outline and a sample task analysis.



Figure 7. Task Sequence for Making the Bed

Terminal Objective. Given that S's bed is in need of changing (sheet's changed one time per week, Saturday morning, or if soiled). S will locate clean sheets, strip the bed, and put new sheets on the bed, all within 20 minutes, with ____ % accuracy for ____ consecutive days.

Stripping Bed Linens

1. Locates laundry basket.
2. Places laundry basket at foot of bed.
3. Picks up bed pillow, grasping at bottom corners of case.
4. Shakes case (letting pillow fall out of case).
5. Puts pillow down out of way.
6. Places pillow case in laundry basket.
7. Pulls off quilt.
8. Places quilt on floor, out of way.
9. Pulls out bottom right corner of unfitted sheet.
10. Pulls out bottom left corner of unfitted sheet.
11. Gathers unfitted sheet.
12. Places sheet in laundry basket.
13. Pulls out top right corner of fitted sheet.
14. Pulls out bottom right corner of fitted sheet.
15. Pulls out bottom left corner of fitted sheet.
16. Pulls out top left corner of fitted sheet.
17. Gathers fitted sheet.
18. Places sheet in laundry basket.

Putting on New Linens

19. Locates set of clean sheets.
20. Places clean sheets on table next to bed.
21. Picks up fitted sheet.
22. Shakes fitted sheet onto bed.
23. Grasps top right rubber edge of sheet and pulls over corresponding corner of mattress.

24. Grasps bottom right rubber edge of sheet and pulls over corresponding corner of mattress.
25. Grasps bottom left rubber edge of sheet and pulls over corresponding corner of mattress.
26. Grasps top left rubber corner of sheet and pulls over corresponding corner of mattress.
27. Picks up unfitted sheet.
28. Shakes unfitted sheet onto bed.
29. Grasps bottom right corner of sheet and tucks under mattress.
30. Grasps bottom left corner of sheet and tucks under mattress.
31. Pulls top of unfitted sheet to head of bed.
32. Smooths sheet.
33. Picks up pillow.
34. Picks up pillow case.
35. Holding pillow under chin, fits case over bottom of pillow.
36. Releases pillow, allowing it to fall into case.
37. Shakes case (letting pillow fall completely into case).
38. Places pillow at head of bed.
39. Picks up quilt.
40. Shakes quilt over bed.
41. Grasps bottom right corner of quilt and tucks under bed.
42. Grasps bottom left corner of quilt and tucks under bed.
43. Pulls top of quilt to head of bed.
44. Smooths quilt.
45. Adjusts as needed.

Donna Meyer and Frances L. Kohl, "Teaching Domestic Living Skills to Severely Handicapped Students," *Teaching Exceptional Children*, Fall 1985, Vol. 18, No. 1. Council for Exceptional Children. Reprinted with permission.

Figure 8. Task Analysis Sequence

A. Develop and write	Short-term objective (a broad but measurable and observable goal statement)
B. Complete	Task ladder subskills 1. 2. 3. 4.
C. List	Prerequisites for skills selected as instructional objectives (enter the student's behavior) 1. 2. 3. 4.
D. Select/write	Instructional objective based on ordered subskills (a three-part statement containing a condition, a performance, and an evaluation)

Figure 9. Sample Task Analysis

A. Short-term objective	The student will demonstrate skill in pedestrian safety that will allow him or her to travel independently within the community.
B. Task ladder (subskills)	<ol style="list-style-type: none"> 1. Uses locomotor skills for walking, stepping, standing, and sitting. 2. Uses orientation skills: stop, go, wait; up, down; in, out; push, pull; over, under; left, right; front, back; across; directions (north, south, east, west) 3. Uses environmental clues: verbal and visual directions, signals, maps, other visuals 4. Uses steps, stairs, sidewalks, revolving doors, escalators, elevators <ol style="list-style-type: none"> a. Outdoor travel to and from neighborhood stores, shops, malls, service buildings, recreational buildings b. Indoor travel in neighborhood stores, shops, malls, service buildings, recreational buildings 5. Uses modes of transportation alone: walk, bus, taxi, bike 6. Uses money to pay for goods and services 7. Uses appropriate behavior
C. Prerequisites	<ol style="list-style-type: none"> 1. Has color recognition 2. Has functional reading ability 3. Is verbal 4. Is independently mobile 5. Understands and retains instruction 6. Will request assistance 7. Recognizes numbers 0-9 8. Can count exact change to 60 cents 9. Uses a calculator to add and subtract numbers (functional math) 10. Uses public transportation with an adult 11. Uses community services with an adult 12. Can ride a bike independently 13. Knows personal data: name, address, telephone number, emergency numbers 14. Travels independently within school
D. Instructional objectives	<p>Condition — Given the experience of a tour through a department store, Behavior — the student will locate and use the up and down escalators to travel to specified areas in the store Criterion — in at least four out of six trials.</p> <hr/> <p>Condition — Given large photographs and cardboard signs, Behavior — the student will identify and state the location of specified common signs and symbols Criterion — with 85% accuracy.</p> <hr/> <p>Condition — Given verbal direction, Behavior — the student will use a rhythmic walking pattern Criterion — on three consecutive occasions.</p>



7. Lesson Planning

Requirements and Strategies

Rule 3301-35-02 B.3. of *Minimum Standards* requires that "daily lesson plans shall give direction for instruction and implementation of courses of study." Teachers are required to prepare written lesson plans, but standards do not specify or require certain components or a particular format for lesson plans. These decisions are made by school district personnel. Local policy or administrative procedures may require that teachers include specific components or use a uniform format, or administrators may leave these matters to the discretion of the teachers.

During evaluations by the Ohio Department of Education, state staff discuss lesson plans with school district personnel to ascertain their relationship to courses of study. Although written daily lesson plans will satisfy the requirement of standards, district personnel are encouraged to promote quality lesson planning for the enhancement of student learning.

Through cooperative efforts of administrators and teachers, strategies can be developed and implemented to assure that lesson plans are well-developed and reflect courses of study and, for handicapped children, IEPs. Some techniques that have been successfully used by school districts include using checklists of subject objectives, correlating textbooks with courses of study, providing inservice on lesson planning, and periodically reviewing teachers' lesson plans.

Benefits of Planning

While meeting state requirements for written lesson plans, thoughtful planning has additional benefits which facilitate student learning. These benefits include the following:

1. Prepares for deliberate actions in the classroom
2. Provides security for the teacher
3. Enables the enrichment of lessons through the use of varied resources and strategies
4. Economizes time, thereby increasing student time-on-task
5. Facilitates continual skill reinforcement
6. Improves classroom management which includes preventing and minimizing discipline problems

The Planning Process

Teachers plan for instruction in various ways. The use of courses of study and curriculum guides, textbooks or other primary instructional materials, textbooks plus supplementary aids, and student needs assessments can enhance the planning process. Personal preferences, instructional assignments, available materials, and administrative directives should be taken into account when developing lesson plans to maximize student learning at any grade level.

The following questions may provide a focus for planning instruction:

1. What is the course of study content?
2. What objectives are to be taught?
3. What learning activities will be used?
4. How will the activities be organized?
5. What teaching methods will be employed?
6. What materials and resources are needed?
7. What evaluative techniques will be appropriate?

Components of lesson plans might include a specified block of time, subject, objectives, materials, procedures/activities/methods/strategies, and evaluation. In subjects that are competency based, assessment and intervention strategies related to pupil performance objectives might also be included. As stated before, specific components of lesson plans are determined by school district personnel.

Daily Lesson Plans

Lesson planning is a means by which the teacher plans for communication with the student. The success of this communication is closely linked to the student's achievement of the established goals and objectives. The daily lesson plans are the "what" and "how" the teacher does so that the student achieves IEP goals and short-term instructional objectives.

There is nothing sacred about a particular format for writing lesson plans. All formats have advantages and disadvantages. Some teachers prefer to use an outline format, while others merely record descriptive statements about the intent of the lesson and the activities they plan to use.

The format used in Figures 10 and 11 is designed as a plan from which a teacher can effectively teach adaptive behavior skills. It allows the teacher to organize the lesson in a logical sequence that progresses from a statement of objectives to a list of activities and resources that will be used to accomplish the objectives. A teacher is not dependent on the author of the lesson plan if a format of this type is carefully developed, as this format may be clearly understood by all teachers.

Figure 10. Excerpt From Lesson Plan for Lori

Goal	Lori will demonstrate proper care of clothing without prompting or assistance.
Instructional objective	Lori will take off her coat and hang it up when she comes into the room.
Teacher activities	<ol style="list-style-type: none"> 1. Direct Lori to stand by the coat area and hang up her coat, then see that the other students hang up their coats. 2. Put Lori in charge of hanging up coats. 3. Help parents keep a chart that shows how regularly Lori hangs up her coat at home without prompting or assistance. 4. Give Lori rewards, depending on her reward system, for good results (e.g., hanging up her coat five times without prompting or assistance). 5. Ask Lori to explain why coats should be hung up.



Figure 11. Excerpt From Lesson Plan for Mike

Goal	Mike will demonstrate, by verbal response, respect for other people and appropriate problem-solving skills.
Instructional objectives	Mike will read a newspaper article about a violent act leading to an arrest of a young man. Mike's response to questions about the article will indicate an understanding of appropriate alternative behaviors to settle disputes.
Teacher activities	<ol style="list-style-type: none">1. Ask Mike to read newspaper article.2. Ask Mike to retell the events in the article in the order of their occurrence.3. Make up questions so that Mike will choose nonviolent methods to solve problems and settle disputes between people.4. Plan a short discussion on emotions and how to stay in control during the height of emotions.5. Show short film on emotions, <i>Anger—One Letter From Danger</i>.6. Discuss film.

The activities in which the student is involved throughout the day should lead to achievement of the annual goals in the IEP. Activities that help one child achieve a goal, however, may not help another child achieve the same goal. It is important that the daily lesson plans revolve around the student and that the annual goals be the aim.

Daily activities must be at a level where the child can perform and progress into new learning at a challenging but nonthreatening rate. New or introductory materials should be connected to an activity or material with which the student is familiar. Thus, learning is a continuation and growth process, not an isolated situation whereby the student is expected to learn some bit of information or a mixture of unrelated facts.

The daily lesson plans written in April may not necessarily relate to the short-term objectives written the previous September. By April, a student may have progressed beyond those short-term objectives, and new objectives should be pursued to further the student's educational program.

Teacher Strategies

Teachers may develop strategies to elicit the desired student behaviors. Strategies may include the following:

1. Provide frequent positive reinforcement to all students who appropriately and independently follow the rules.
2. Ask students who follow the rules to help those who do not.
3. List the desired behaviors as classroom rules which are posted in a visible place. Discuss these rules and expectations with the students.

Whenever possible, teachers should give students positive reinforcement when they demonstrate the desired behaviors. In the case of Lori, a special mention, a thumbs-up, or a wink can serve as positive reinforcement for Lori hanging up her coat.

Motivation may be sparked by an offer of a special reward. The teacher may determine Lori's reward system and reward her accordingly for her success. Lori should be encouraged to take pride in her personal belongings and to work hard to earn the reward. Upon hanging up her coat five times without a reminder, Lori may be presented with her reward. The time between tangible rewards should be increased so that the behavior becomes independent, habitual, and spontaneous, rather than dependent on an expected reward.

Emphasis on care of personal belongings can be made in various units in health, social studies, and other appropriate academic classes.

8. Selected Adaptive Behavior Instruments

Overview The following tests and scales are frequently used to assess adaptive behavior. For more information or to determine which instruments would best suit your needs, check the instruments and manuals; the latest edition of *Mental Measurements Yearbook*, published by the Buros Institute of Mental Measurements; or *Tests: A Comprehensive Reference for Assessments in Psychology, Education, and Business*, published by Test Corporation of America.

AAMD Adaptive Behavior Scale, School Edition (ABS-SE) 1981 Revision

- Authors** Kazuo Nihira and others
- Range** Children, ages 3 through 16, thought or known to be mentally retarded, emotionally disturbed, or learning disabled
- Purposes** Assessment of social and daily living skills; screening; placement evaluation; instructional planning
- Examiner** First-person assessment by teacher or well-trained aide; third-person assessment by a teacher, psychologist, social worker, or other trained person who knows the student well
- Respondent** Student or third person responds to examiner who completes the scale
- Domains** *Part 1:* Independent functioning, physical development, economic activity, language development, numbers and time, prevocational activity, self-direction, responsibility, socialization. *Part 2:* Aggressiveness, antisocial vs. social behavior, rebelliousness, withdrawal vs. involvement, mannerism, vocal habits, symptomatic behavior, use of medications
- Time** 15-45 minutes or more, depending on form used
- Other** When feasible, respondents should include both a teacher and a parent for comparative data

Norming based on teacher ratings of over 6,500 handicapped children in California and Florida; factors considered include levels of retardation, school placements, ethnic status, and community structures
- Publisher** CTB McGraw-Hill
Publishers Test Service
Del Monte Research Park
2500 Garden Road
Monterey, CA 93940

(800) 538-9547

Children's Adaptive Behavior Scale (CABS) 1980 Edition

- Authors** Bert O. Richmond and Richard H. Kicklighter
- Range** Mildly retarded children, ages 5 to 11, whose performance on an intelligence test may not be indicative of true adaptive potential

Purposes	Assessment of adaptive behavior; collection of criterion-referenced data for instructional planning
Examiner	School or clinical psychologist, counselor, educational diagnostician, or any person trained in individual assessment procedures
Respondent	Child; paper-pencil observations, usually in a one-to-one setting; sometimes suitable for self-administration in a group setting
Domains	Language development, independent functioning, family role performance, economic-vocational activity, socialization
Time	Varies, about 30-40 minutes
Other	Scores not to be used alone for important decisions, such as placement Very limited norming with 250 mildly retarded children in South Carolina and Georgia Not recommended for language disabled children or those with a primary language other than English
Publisher	Humanics Limited 1389 Peachtree Street, N.E. Suite 201, P.O. Box 7447 Atlanta, GA 30309 (800) 874-8844

Comprehensive Test of Adaptive Behavior (CTAB) 1984 Edition

Author	Gary Adams
Range	Birth through adult handicapped
Purposes	Assessment of handicapped individuals' abilities; evaluation and placement instrument; data for establishing scope and sequence of training and instruction
Examiner	Questionnaire filled out by respondent
Respondent	Teacher or psychologist who knows the child well; parent, guardian, or primary caretaker completes a survey responding to items not observed at school
Domains	Self-help, home living, independent living, social, sensory motor, language concepts, and academic skills
Time	Variable
Other	CTAB is a comprehensive evaluation of <i>Normative Adaptive Behavior (NABC)</i> items Inappropriate for normally developing individuals acquiring skills in normal developmental order Norming based on a sample of 4,500 retarded individuals, ages 10 to 60 or over, in institutions and community-based programs around the nation; also 2,000 students, ages 5 to 22, in 15 school systems in Florida Originally published by Charles E. Merrill Publishing Company

Publisher The Psychological Corporation
555 Academic Court
San Antonio, TX 78204

(800) 228-0752

Normative Adaptive Behavior Checklist (NABC) 1984 Edition

Author Gary Adams

Range Birth through 21 handicapped or suspected handicapped

Purposes Comparing performance skills needed for independent living with performance skills of peers; identifying children who need further assessment; evaluating eligibility for programs and services

Examiner Classroom teacher or school psychologist, among others

Respondent Person who knows the child best, usually a parent or guardian; checklist may be sent home or used in an interview format

Domains Self-help, home living, social skills, sensory motor, language concepts, academic skills

Time 20-30 minutes

Other Condensed version of *Comprehensive Test of Adaptive Behavior (CTAB)*

Yes-No questions, along with an explanation column

Norming based on over 6,000 children, birth to age 21; sampling diversified by age, sex, and region of the nation

Originally published by Charles E. Merrill Publishing Company

Publisher The Psychological Corporation
555 Academic Court
San Antonio, TX 78204

(800) 228-0752

Scales of Independent Behavior 1985 Edition

Authors Robert H. Bruiniuks and others

Range Infants through handicapped adults

Purposes Evaluating functional independence and adaptive behavior; assessing eligibility for programs and services; determining instructional objectives

Examiner Trained interviewer

Respondent Person familiar with the student such as a parent, primary caretaker, or teacher; handicapped adolescent or adult, if not too severely retarded

- Domains** Motor skills (gross and fine), social interaction and communication (social interaction, language comprehension, language expression), personal independence (eating and meal preparation, toileting, dressing, personal self care, and domestic skills), community independence (time and punctuality, money and values, work skills, home/community orientation), problem behaviors (hurtful to self, destructive to property, disruptive behavior, unusual or repetitive habits, socially offensive behavior, withdrawal, inattention, uncooperative behavior)
- Time** 10-15 minutes each for short-form or early development scale
Combined total of 60 minutes or less for broad independence scales and problem behavior scales
- Other** Part IV of Woodcock-Johnson Psycho-Educational Battery
Respondent helps establish training objectives for each subscale, which easily transfer into IEP objectives
Appropriate for use with children of Hispanic origin
Norming based on sample of 1,764 persons, three months through age 44; diversified by sex, race, geographic region, and type of community
- Publisher** DLM Teaching Resources
P.O. Box 4000
One DLM Park
Allen, TX 75002
(800) 527-4747

Vineland Adaptive Behavior Scales (VABS) Classroom Edition, 1984 Revision

- Authors** Sara Sparrow and others
- Range** Mentally retarded and handicapped children, ages 3 through 12
- Purposes** Assessing students' adaptive behavior; determining personal and social strengths and weaknesses; establishing eligibility for program placement and services
- Examiner** Teacher plus a psychologist, social worker, or other qualified professional to determine and interpret results
- Respondent** A teacher who is very familiar with the behavior of the child being evaluated; multiple respondents (one per domain) may be necessary, but norming is based on a single respondent
- Domains** Communication (receptive, expressive, and written), daily living skills (personal, domestic, and community), socialization (interpersonal relationships, play and leisure time, and coping skills), and motor skills (gross and fine)
- Time** About 20 minutes
- Other** Available in Spanish
Norming based on a representative national sample of 3,000 children
- Publisher** American Guidance Service
Publishers' Building
Circle Pines, MN 55014
(800) 321-2560

Vineland Adaptive Behavior Scales (VABS)
Interview Edition (Survey and Expanded Forms), 1984 Revision

Authors Sara Sparrow and others

Range Birth through age 18, also low-functioning adults

Purposes Survey form — general assessment of adaptive strengths and weaknesses

Expanded form — comprehensive assessment of adaptive behavior; systematic basis for preparing IEPs for educational, habilitative, or treatment programs; evaluation and placement instrument

Examiner Psychologist, social worker, or other trained professional interviewer qualified to determine and interpret results

Respondent Adult most familiar with the behavior of the individual being evaluated, usually a parent, guardian, or primary caretaker; multiple respondents (one per domain) may be necessary, but norming is based on a single respondent

Domains Communication (receptive, expressive, and written), daily living skills (personal, domestic, and community), socialization (interpersonal relationships, play and leisure time, and coping skills), and motor skills (gross and fine)

Time Survey form — 20-60 minutes

Expanded form — 60-90 minutes

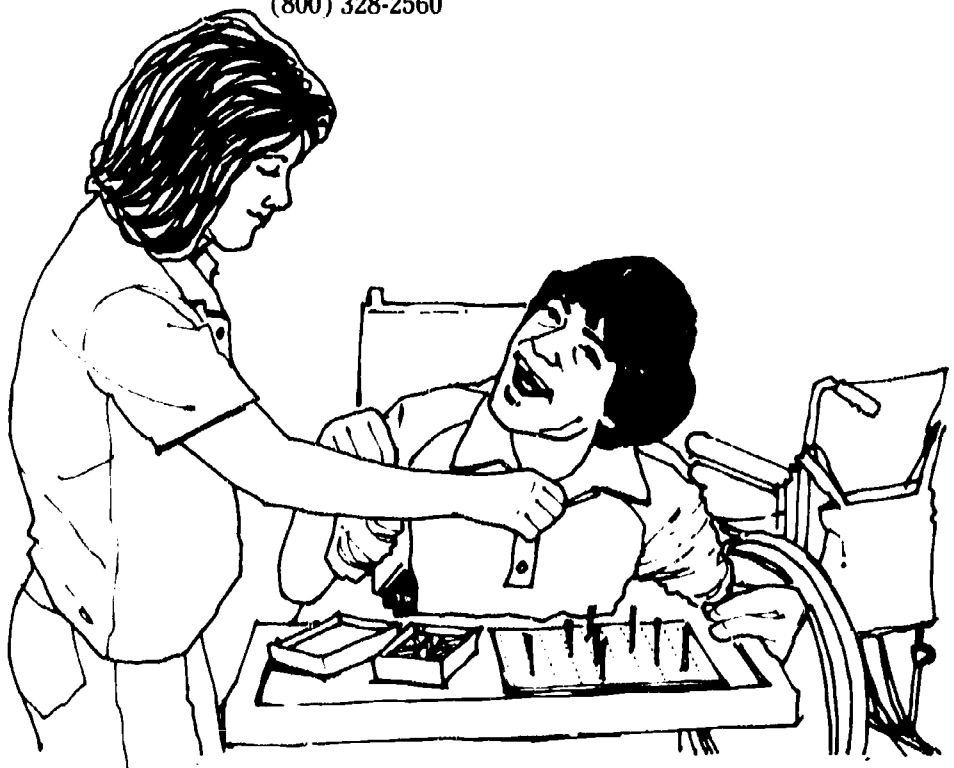
Other Expanded form may be used alone or as a follow-up to survey form results

Available in Spanish

Large, recent norming sample of 4,800 handicapped and nonhandicapped individuals; supplementary groupings including mentally retarded, emotionally disturbed, hearing impaired, and visually handicapped

Publisher American Guidance Service
Publishers' Building
Circle Pines, MN 55014

(800) 328-2560



9. Summary

Benefits for Students

The 1987-88 school year has been named the "Year of the ABC's: Accountability, Basics, and Citizenship." The *basics* of special education programming for developmentally handicapped and multihandicapped students must focus on the development of adaptive behavior skills as well as functional academics. Through the acquisition of adaptive behavior skills as provided in special education programs throughout Ohio, DH and MH students will gain a sense of personal and social responsibility and, thus, develop *citizenship*. The special education programs can be held *accountable* for providing skills which lead to the independence of DH and MH students and greater productivity within the world of work.

If the guidelines presented in this publication are followed, DH and MH students will benefit from the careful and thorough work of the multifactored evaluation team and the IEP team in conjunction with the instruction and support provided by parents, teachers, and program supervisors.

On August 19, 1987, Superintendent of Public Instruction Franklin B. Walter, speaking before a group of nearly 1,000 Ohio school administrators, said, "Success in the classroom ultimately translates into a more productive life." Ultimately, the success of the special education classrooms throughout Ohio will translate into a more productive life for DH and MH students.



10. References

For Further Information

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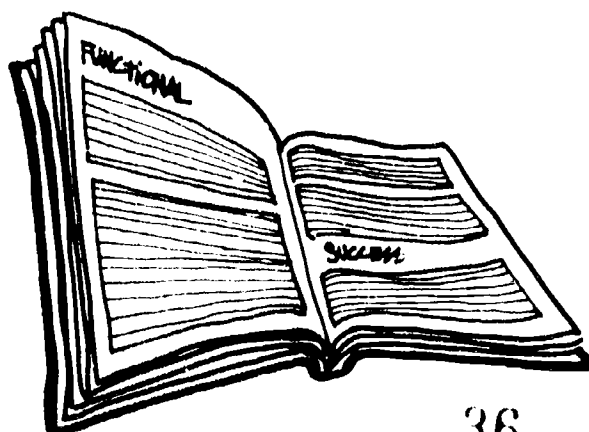
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U.S. Code. Sections 1400-2148.5.



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933 High Street
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